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Bib Data Sheet

CONFIRMATION NO. 2448

<b>SERIAL NUMBER</b> 09/533,798	<b>FILING DATE</b> 03/24/2000 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> 078883/0120
<b>APPLICANTS</b> Miles William Carroll, Oxon, UNITED KINGDOM; Kevin Alan Myers, Oxon, UNITED KINGDOM;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/126,187 03/25/1999 and claims benefit of 60/126,188 03/25/1999				
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 9825303.2 11/18/1998 UNITED KINGDOM 9901739.4 01/27/1999 UNITED KINGDOM 9917995.4 07/30/1999				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 06/14/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met ? Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 36
				<b>INDEPENDENT CLAIMS</b> 11
<b>ADDRESS</b> MICHELE M. SIMKIN FOLEY & LARDNER WASHINGTON HARBOUR 3000 K STREET, N.W., SUITE 500 WASHINGTON, DC 20007-5143				
<b>TITLE</b> Polypeptide				
<b>FILING FEE RECEIVED</b> 905	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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<b>SERIAL NUMBER</b> 09/533,798	<b>FILING DATE</b> 03/24/2000 <b>RULE</b> -	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1643	<b>ATTORNEY DOCKET NO.</b> 078883/0120
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**APPLICANTS**  
 Miles William Carroll, Oxon, UNITED KINGDOM;  
 Kevin Alan Myers, Oxon, UNITED KINGDOM;

**\*\* CONTINUING DATA \*\*\*\*\***  
 THIS APPLN CLAIMS BENEFIT OF 60/126,187 03/25/1999  
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 WHICH CLAIMS BENEFIT OF 60/126,188 03/25/1999  
 AND CLAIMS BENEFIT OF 60/126,188 03/25/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
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 \*\* 06/14/2000

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**ADDRESS**  
 Bernhard D Saxe  
 Foley & Lardner  
 Washington Harbour  
 3000 K Street N W Suite 500  
 Washington ,DC 20007-5109

**TITLE**  
 Polypeptide

<b>FILING FEE RECEIVED</b> 905	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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